For replacement ballot, mail or bring
form to:
County Clerk-Recorder
1055 Monterey Street, D120
San Luis Obispo CA 93408
(805) 781-5080
Or fax the form to:

Property ID:	
Parcel/APN #	
Date Issued:	

Or fax the form to (805) 781-1111

## STATEMENT OF NEW OWNER FOR ASSESSMENT BALLOT

l,		do hereby state, under	
(Print N	lame)		
penalty of perjury, t	the following:		
I purchased the pro	perty listed below on _	and	
as referenced by Document #		(this is the County	,
Recorder's number	on your deed).		
I request a ballot be property with me	e issued to me and the t	following individuals who purchased this	
Name	Address	City/State/Zip Code	
Name	Address	City/State/Zip Code	
(add sheet of add	itional owners if neede	ed)	
Dated:			
Signature of Prop	erty Owner:		_
Residence Addres	ss:		_
Mailing Address:			